

Work Order ID 92257

Tuesday, October 23, 2012 3:17:09 PM

92257

Page 1

Item ID: D3449-1 Accept ***N900040100*** Setup Start ***NS1***
 Revision ID: Stop ***NS2***
 Item Name: Pad
 Start Date: 10/23/2012 Start Qty: 8.00 ***8*** Cust Item ID:
 Required Date: 11/16/2012 Req'd Qty: 8.00 ***8*** Customer:
 Reference:

Approvals: Process Plan: WFI Date: 12-10-23 Tooling: _____ Date: _____ Run Start ***NR1***
 QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop ***NR2***

| Sequence ID/ Work Center ID | Operation Description | Set Up/ Run Hours | Tool ID | Tool # | Plan Code | Accept Qty | Reject Qty | Reject Number | Insp. Stamp |
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
| Draw Nbr | Revision Nbr | | | | | | | | |
| D3449 | Rev A | | | | | | | | |

100 PURCHASING 0.00
100
 Purchasing Memo 0.00
 Purchasing Issue P/O: 18230 Fabricate as per Dwg D3449Possible
 Supplier: Tulmar Safety SystemsMaterial release note is required

CL 12/10/24 (8)

110 Receive & Inspect for Damage & Mat'l Certs 0.00
110
 Packaging Memo 0.00
 Packaging Ensure Material Release Note is attached

R 12/10/1 (8)

120 QC6- Inspect dimensions to drawing 0.00
120
 QC Memo 0.00
 Quality Control

DAS
16
2-83
12/10/2

(8)

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

| | | | | | | | | | | | | |
|---|------|------|---|---|----------------------|---|----------------|--------------|--|--|---|--|
| Work Order: _____ Part No. _____ NCR No. _____ | | | | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/> | | AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div> | | | | | | |
| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector | | | |
| Doc/Data <input type="checkbox"/> | | | | | | | | | | | | |
| Equip/Tooling <input type="checkbox"/> | | | | | | | | | | | | |
| Operator <input type="checkbox"/> | | | | | | | | | | | | |
| Material <input type="checkbox"/> | | | | | | | | | | | | |
| Setup <input type="checkbox"/> | | | | | | | | | | | | |
| Other <input type="checkbox"/> | | | | | | | | | | | | |
| Process <input type="checkbox"/> | | | | | | | | | | | | |
| Supplier <input type="checkbox"/> | | | | | | | | | | | | |
| Training <input type="checkbox"/> | | | | | | | | | | | | |
| Unapproved <input type="checkbox"/> | | | | | | | | | | | | |
| FAULT CATEGORY | | | | | | | | | | | | |
| Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube | | | General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio | | | <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions | | | <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge | | <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other | |

Work Order ID 92257***92257***

Page 2

Tuesday, October 23, 2012 3:17:09 PM

Item ID: D3449-1

Accept

N900040100Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Pad

Start Date: 10/23/2012 Start Qty: 8.00

8

Cust Item ID:

Required Date: 11/16/2012 Req'd Qty: 8.00

8

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Run Start ***NR1***

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop ***NR2***Sequence ID/
Work Center IDOperation
DescriptionSet Up/
Run Hours

Tool ID

Tool #

Plan
CodeAccept
QtyReject
QtyReject
NumberInsp.
Stamp

130

Identify as per dwg & Stock Location: ST372 0.00***130***

Packaging

Memo

0.00

Packaging

140

QC21- Final Inspection - Work Order Release

0.00

140

QC

Memo

0.00

Quality Control

10/24/12 (S)12/11/12 (S)

MLJ 12-11-02

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

| | | | | | | | | | | | |
|---|------|------|---|---|----------------------|---|----------------|--------------|---|--|--|
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| Equip/Tooling <input type="checkbox"/> | | | | | | | | | | | |
| Operator <input type="checkbox"/> | | | | | | | | | | | |
| Material <input type="checkbox"/> | | | | | | | | | | | |
| Setup <input type="checkbox"/> | | | | | | | | | | | |
| Other <input type="checkbox"/> | | | | | | | | | | | |
| Process <input type="checkbox"/> | | | | | | | | | | | |
| Supplier <input type="checkbox"/> | | | | | | | | | | | |
| Training <input type="checkbox"/> | | | | | | | | | | | |
| Unapproved <input type="checkbox"/> | | | | | | | | | | | |
| FAULT CATEGORY | | | | | | | | | | | |
| Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube | | | General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio | | | <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions | | | <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other | | |

Picklist Print

Tuesday, October 23, 2012 3:17:09 PM

Page 1

Work Order ID: 92257

Parent Item: D3449-1

Parent Item Name: Pad

Start Date: 10/23/2012

Required Date: 11/16/2012

Start Qty: 8.00

Required Qty: 8.00

Comments: IPP A05.10.06New issueKJ/JLM

| Component Item ID/ Item Name | Replacement Item ID | Mfg/ Purch | Bin Item | Primary Location | Last Location | Route Seq ID | Unit of Measure | Qty on Hand | Qty per Kit | Total Qty | Qty Issued | Date Issued | Status |
|---------------------------------|------------------------|---------------|-------------|---------------------|------------------|-----------------|--------------------|----------------|-------------|--------------|---------------|----------------|--------|
| D3449-IP Pad | | Purchased | No | | | 100 | Each | 0.0000 | 1 | 8 | | | |

2/2/11/01 @

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

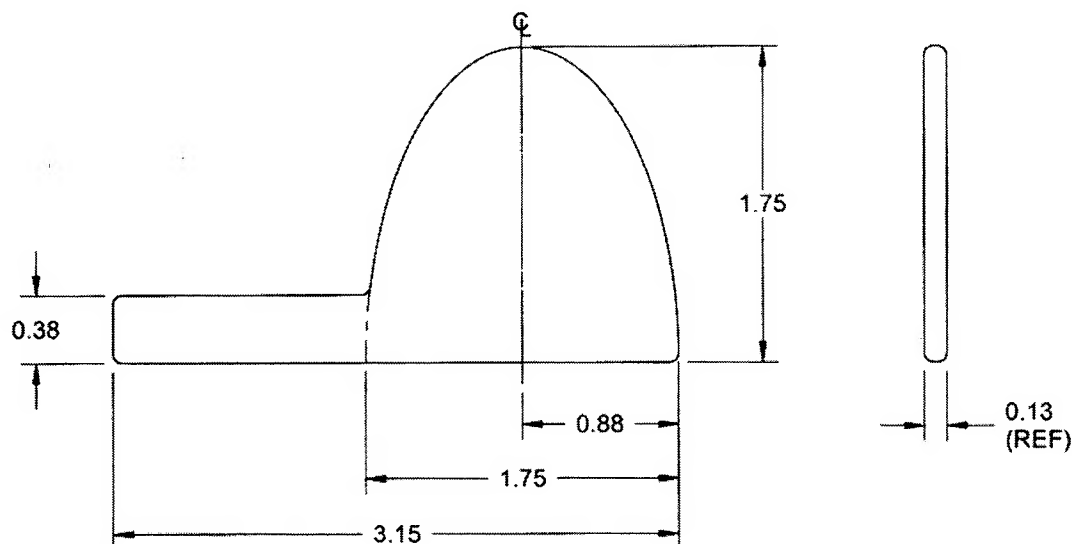
QA Closed: _____ Date: _____

| | | | | | | | | | | | | |
|---|------|------|---|---|-------------------|---|-------------|--------------|--|--|---|--|
| Work Order: _____ Part No. _____ NCR No. _____ | | | | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/> | | AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div> | | | | | | |
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| Doc/Data <input type="checkbox"/> | | | | | | | | | | | | |
| Equip/Tooling <input type="checkbox"/> | | | | | | | | | | | | |
| Operator <input type="checkbox"/> | | | | | | | | | | | | |
| Material <input type="checkbox"/> | | | | | | | | | | | | |
| Setup <input type="checkbox"/> | | | | | | | | | | | | |
| Other <input type="checkbox"/> | | | | | | | | | | | | |
| Process <input type="checkbox"/> | | | | | | | | | | | | |
| Supplier <input type="checkbox"/> | | | | | | | | | | | | |
| Training <input type="checkbox"/> | | | | | | | | | | | | |
| Unapproved <input type="checkbox"/> | | | | | | | | | | | | |
| FAULT CATEGORY | | | | | | | | | | | | |
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| | | | |
|-------------------------------|--------------------------------|---|------------------------|
| DESIGN <i>[Signature]</i> | DRAWN BY <i>[Signature]</i> | DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA | |
| CHECKED <i>[Signature]</i> | APPROVED <i>[Signature]</i> | DRAWING NO. D3449 | REV. A SHEET 1 OF 1 |
| DATE 05.08.15 | | TITLE PAD | SCALE 1:1 |
| A | 05.08.15 | NEW ISSUE | |

RELEASED
[Signature]
05/08/15



92257

D3449-1 PAD

NOTES:

- 1) POSSIBLE SUPPLIER: TULMAR SAFETY SYSTEMS
- 2) MATERIAL: FOAM, SBR CLOSED-CELL, ASTM D1056 2A2, 1/8"x42"x72", ETHYLENE PROPYLENE NEOPRENE. FLAME RETARDANT, SERVICE TEMP -40°F TO +200°F. (REF. TULMAR P/N 1637-002)
- 3) FINISH: COVER SBR FOAM WITH FABRIC, 100% 420 DENIER NYLON, MIN THREAD COUNT 35x35, POLYURETHANE COATED ONE SIDE, COLOUR BLACK FROM J. ENNIS 58" WIDE (REF. TULMAR P/N 1495)
- 4) TOLERANCES ARE PER DART QSI 018 UNLESS OTHERWISE NOTED
- 5) ALL DIMENSIONS ARE IN INCHES
- 6) BREAK ALL SHARP EDGES 0.005 TO 0.010

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NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

| | | | | | | | | | | | |
|--|------|------|-----|---|-------------------|---|-------------|--------------|--------------|--|--|
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| Doc/Data | | | | | | | | | | | |
| Equip/Tooling | | | | | | | | | | | |
| Operator | | | | | | | | | | | |
| Material | | | | | | | | | | | |
| Setup | | | | | | | | | | | |
| Other | | | | | | | | | | | |
| Process | | | | | | | | | | | |
| Supplier | | | | | | | | | | | |
| Training | | | | | | | | | | | |
| Unapproved | | | | | | | | | | | |

| FAULT CATEGORY | | | |
|---|---|---|---|
| Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube | General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio | <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions | <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other |



Dart Aerospace Ltd.
1270 Aberdeen Street
Hawkesbury, ON K6A 1K7
Tel: 613 632 9577
Fax: 613 632 1053

PURCHASE ORDER

Purchase Order ID PO18230

Purchase Order Date 10/23/12

PO Print Date 10/24/12

Page Number 1 of 1

Order From :

VC-TUL001

TULMAR SAFETY SYSTEMS
1123 CAMERON ST
HAWKESBURY, ON K6A 2B8
CA

Contact Name

Buyer

Chantal Lavoie

Vendor Phone

613 632 1282

Requisition Nbr

Vendor Fax

613 632 2030

Tax Resale Nbr

10127-2607

Vendor Account Nbr

Terms

Net 30

Currency

CAD

FOB

Destination-Collect

Ship To :

DART AEROSPACE LTD

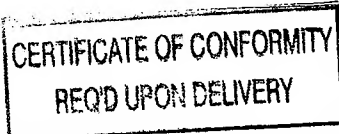
1270 ABERDEEN
HAWKESBURY, ON K6A 1K7
CANADA



| Line Nbr | Reference Revision ID Vendor Part Number | Description/ Mfg ID | Req Date/ Taxable | Req Qty/ Unit of Measure | Ship Method | Unit Price | Extended Price |
|----------|--|------------------------|-----------------------------------|-----------------------------|-------------|------------|-------------------|
| 1 | D3445-041P | Belt Assembly | 11/02/12 Yes | 6.00 Each | Dart Truck | \$26.4700 | \$158.82 |
| | | Special Inst: | AS PER DWG D3445 REV. A B92251 | | | | |
| 2 | D3449-1P | Pad | 11/02/12 Yes | 8.00 Each | Dart Truck | \$30.0000 | \$240.00 |
| | | Special Inst: | AS PER DWG D3449 REV. A B92257 | | | | |

PO Total:

\$398.82



Change Nbr: 3

Change Date: 10/24/12

No substitution or deviation without
consent.
Certificate of Conformity or Material
Certification required **YES** NO

PACKING SLIP

TULMAR

Tulmar Safety Systems Inc.
1123 Cameron Street
Hawkesbury, ON K6A 2B8 CA
Tel: 613-632-1282
Fax: 613-632-2030
MID : XOTULSAF1123HAW
email: info@tulmar.com

Packing Slip No.

45718

Ship Date

30-Oct-12

Bill To:

Dart Aerospace
1270 Aberdeen Street
Hawkesbury, ON K6A 1K7. Canada

Ship to:

Dart Aerospace
1270 Aberdeen Street
Call Chantal Lavoie
Tel: 613-632-9577
Hawkesbury, ON K6A 1K7. Canada

| | | | |
|---------------------------------------|--------------------------------------|---|---|
| Order number 29400 | Sales order date 23-Oct-12 | Account number CDART100 | Account manager Helena Vandeweerd |
| PO number PO18230 | Ship Via Pick-Up | Shipping Terms FOB HAWKESBURY | |
| Item No. Description | Quantity ordered | UOM | Qty Shipped/Returned |
| | | | Quantity on back order |

8420
Belt Ass'y, Black/1" web, Side release buckle,
Drawing No: D3445-041
DWG Rev: A
Line 1

6 EA 6

Lot No: BATCH0000000008 Qty: 6

8421-100
Dart Blade Fold Kit-Pad #1/
Drawing No: (Ref D3449 (P/N D3449-1 RevA))
DWG Rev: A

8 EA 8

Lot No: BATCH0000000006 Qty: 8

Shipper

Air Reed

Date:

OCT 30 2012

Certificate of Conformance

☒ See Certification Enclosed

I hereby certify that the items listed hereon have been inspected, and / or tested (as applicable), conform to all specifications and requirements detailed in the contract or purchase order. Objective evidence to support this statement is on file, and can be made available upon request.

If any questions or concerns, please contact QA Manager @ 613-632-1282 ext. 245.

Authorized Inspector

Roxanne Lanthier

Date:

OCT 30 2012



J. ENNIS FABRICS LTD.

Wholesale Distributor of Textiles and Supplies

September 6, 2012

Fax To: Tulmar Safety Systems
Fax: 613-632-2030
Attention: Meagan

**EDMONTON
HEAD OFFICE**
12122 - 68 Street
Edmonton, AB T5B 1R1
Canada
Phone: (780) 474-5721

Certificate of Conformance

Re: PO 23885-00 for Oxford 7 Black

The goods shipped on PO 23885-00 are as per sampled goods. Specification as follows:
As per mill documentation:

TORONTO
6300 Kenway Drive
Mississauga, ON L5T 2N3
Canada

Oxford 7 Black is in compliance with the following standards:

Width: Product is 58 Inches Wide.

Roll Size: Average Roll Length is 75 Yards.

Weight: Product Weight is 6.79 Ounces per Sq.Yd. /Product Weight is 10.94 oz per Lin.Yd

Content: 100% Nylon

CALGARY
2nd Floor, 337 - 17 Avenue SW
Calgary, AB T2S 0A5
Canada

Coating: Product has a Polyurethane Coating {approximately 0.65 oz/ Sq.Yd. (18.5g/sq.yd.)}

Denier: Yarn is 420 Denier.

Thread Count: Construction is 62 x 38 Threads per Square Inch

Protective Finish: Product is Water Repellent.

Hydro Resist: AATCC 127 (Suter): Average 800 mm

VANCOUVER
13911 Bridgeport Road
Richmond, BC V6V 1J6
Canada

Piece # 107502593 Manufacture Date: 04/11/12, Lot Number: 408061

MONTREAL
9280 boulevard du Golf
Anjou, QC H1J 3A1
Canada

Sincerely;
J. Ennis Fabrics Ltd.

C. Harris

Crystal Harris
Customer Service Center Team Lead/Supervisor

English: 1-800-66-ENNIS

Fax: (780) 479-6135
www.jennisfabrics.com

Français: 1-888-66-ENNIS

c/c's used
to mbs.
8421-100
Page 1 of 3

Lorraine L.

TSS 1495 B#24. ... (S)

| | | | |
|------------------|---|-----------------|--|
| E.F. Walter Inc. | CERTIFICAT DE CONFORMITÉ CERTIFICATE OF COMPLIANCE | | Approved JR Date 1/3/02 |
| Revision # 0 | Revision date: January 30, 2002 | Doc # F.7.5.5.A | Page 1 of 1 |

Date : 04/14/2009

VENDU À
SOLD TO

6048

TULMAR SAFETY SYSTEMS INC.

1123 CAMERON STREET

HAWKESBURY ONT

K6A 2B8

FOURNISSEUR
VENDOR

E.F. WALTER INC.

180 BARTOR ROAD

TORONTO, ONTARIO

M9M 2W6

Commande / Order # 15534-00

Notre / Our Reference # 59448

Nous certifions par la présente que la totalité du matériel inscrit ci-dessous a été inspecté et vérifié et est conforme aux devis et aux normes mentionnés sur votre commande.

We hereby certify that all of the material listed below has been inspected and tested and conforms to the drawings and / or specifications stated on your purchase order.

| Item | Quantité Quantity | Pièce # Part # | Description |
|-----------|----------------------|-------------------|--|
| 742012007 | 15 sheets | 1637-002 | SC 42 BLACK -TRIMMED - NO SKIN 1/8" TH X 42" X 72" |
| | | | |
| | | | LOT# 84277 MFG DATE: 03/22/09 |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

Signé
Signed



CLIFTON

Adhesive, Inc

Industrial Adhesives & Coatings

A Division of Royal Adhesives and Sealants

FAXED
9/7/12

Date: 9/7/12

LA4009

Shipper #: 21841

Certificate of Compliance

This letter certifies that 44 x 5 gallon pails of LA4009 Polyurethane Adhesive,
lot number (s) 12-236 was shipped to you on 9/7/12. **Drawing No: (Ref 10557979)
**DWG REV: "A"

Clifton Adhesive, Inc manufactured this material according to internal specifications
which include quality control and assurance procedures. The material was
manufactured on 8/23/12 against your Purchase Order # 23716-00.

Shelf Life: 1 year from date of manufacture
Expiration Date: 8/23/13

This letter certifies that 34 x quart cans of CATUV Accelerator,

Lot number 12-229 was shipped to you on 9/7/12.

Clifton Adhesive, Inc manufactured this material according to internal specifications
which include quality control and assurance procedures. The material was
manufactured on 8/16/12 against your Purchase Order # 23716-00.

Shelf Life: 1 year from date of manufacture
Expiration Date: 8/16/13

Sincerely,

Daniel Constantino
Quality Assurance Mgr/ISO Coordinator

48 Burgess Place • Wayne, NJ 07470 USA
Phone: 973-694-0845 • Fax: 973-694-5678
www.cliftonadhesive.com

TSS 7122/54. (2)

Qualified Lab
List No. 1935
(610)-845-2211

BALLY RIBBON MILLS

23 N. 7th Street
Bally, PA 19503

09/30/11

REPORT # 175634-0001

| | | | |
|--------------------|---|--------------|-------------|
| Customer | TULMAR SAFETY SYSTEMS | Shipment | |
| Purchase Order No. | 21294-00 | Shipped Via | ALL-CONNECT |
| Specifications | MIL-W-4088K CLASS 1 TYPE XVII COLOR CHIP #37030 P/N TSS2262B | Memo No. | 369377 |
| Contract No. | UV, MOULD, FUNGUS RESISTANT LOT #9A9557 DOM:09/11 | Quantity | 6641 YD |
| BALLY RIBBON MILLS | 894101000BK | Lot Quantity | 10085 |
| Pattern No. | 8941-1" BLACK NYLON WEBBING | | |

CERTIFICATE OF CONFORMANCE

I certify that this pattern conforms with the physical, chemical, and visual quality of the Military Specifications listed above.


JEROME RICHARDS

QUALITY ASSURANCE MANAGER

Materials used
to mfg. D3445-041
page 1 of 4
Lorraine L.

TSS 2262-B/16 (2)

TULMAR**Certificate of Conformance**

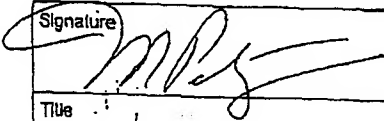
| | | | |
|--------------------------------|---|---|--|
| Tulmar P/N 4142 | Description BUCKLE, BLACK, ACETAL SIDE RELEASE 1" 101. 0100. 6023 | Dwg # / Revision 10505950. DWG Rev: C G-BTS | Qty 1,500 |
| Tulmar PO # 23926.00 | Line Item # 1 | Supplier Name / Address TEXFAST GROUP LTD 88 TYLOS DR., TOR. ONT. M6B 1V9 | Supplier Packing Slip # 075590 |

Supplier Declarations:

| | | |
|--|--|---|
| Hazardous Materials Acknowledgement | The items described below may contain, and their processing may have included, the following substances: | Hexavalent Chromium; Cadmium; Beryllium; Nickel; Mercury; Lead; Asbestos; Radioactive elements YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> |
| Country of Origin of Goods : | | if YES, please complete the HazMat Acknowledgement form @ www.tulmar.com |
| Limited Shelf-Life | <u>Definition:</u> If material is consumed or transformed into final product before end of shelf-life there is no effect on final product. | These items have a limited Shelf-Life YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> |
| Expiry date | <u>Definition:</u> Date after which performance will no longer be as intended - expiration is transferred to the final product. | These items have an expiry date YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> |

if YES, please complete the Time Expired - Shelf-Life questionnaire @ www.tulmar.com

I hereby certify that the goods listed hereon have been inspected and/or tested, as applicable, and conform to all specifications and requirements detailed in the contract or purchase order and relevant quality clauses. Objective evidence to support this statement is on file and can be made available upon request. Should further information be required, please contact:

| | | |
|--|---------------------------------------|------------------------------------|
| Signature  | Name M. PETIZIAN | Date (DD-MM-YY) 11-09-12 |
| Title AVTH. REP. | Email mpetizian@telfast.com | Phone # 416.789.7800 |

Form Revision 16 Feb 2012

TSS # 4142 / 93 (S)

| | | | |
|---|---|---|-----|
| Dry Cleaning #1 (Grading Scale) | 5 | 5 | |
| Dry Cleaning #2 (Grading Scale) | 5 | 5 | |
| Average Dry Cleaning (Grading Scale) | | 5 | 3 |
| Perspiration #1 (Grading Scale) | 5 | 5 | |
| Perspiration #2 (Grading Scale) | 5 | 5 | |
| Average Perspiration (Grading Scale) | | 5 | 3 |
| Color Fastness to Light #1 (Grading Scale) | 5 | 5 | |
| Color Fastness to Light #2 (Grading Scale) | 5 | 5 | |
| Average Color Fastness to Light (Grading Scale) | | 5 | 3.4 |

I certify that the above test were performed under my supervision and in accordance with the specification test requirements and that the reported test results are true, valid and applicable to the samples tested. I further certify that these samples were the only samples tested from the lot of components identified above.

Signed : *Joseph D. Munday*
Joseph D. Munday
Testing Director

Note This Certificate of Compliance is the property of American & Efird Inc. and may not be reproduced except in it's entirety.

TSS 2530/49 